

# Connecticut John R. Justice Loan Repayment Program 2010 - 2011

## JRJ APPLICATION

*Please check which agency this Application is being submitted to as follows:*

\_\_\_\_\_ For full time Connecticut prosecutors, check if submitting Application to:

Division of Criminal Justice  
Office of the Chief State's Attorney  
300 Corporate Place  
Rocky Hill, CT 06067

\_\_\_\_\_ For all other attorneys, including Federal and Connecticut public defenders,  
check if submitting Application to:

Division of Public Defender Services  
Office of Chief Public Defender  
30 Trinity Street, 4<sup>th</sup> Floor  
Hartford, CT 06106

### **Please type (in bold) or print your responses:**

By signing this Application, I understand that the Application and required documentation will not be considered complete unless all of the following documents are submitted:

- a. **JRJ Application** – Completed and signed 2010-2011 JRJ Application Form.
- b. **Proof of Employment Form** – completed Employment Verification Form signed by your employer.
- c. **Proof of Loans** – Recent Account statement for each loan you describe in your Application.
- d. **Service Agreement** – Completed and signed John R. Justice Student Loan Repayment Program (JRJSLRP) Service Agreement.

I understand that the full application packet must be received no later than 5 p.m. on October 17, 2011.

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**I. PERSONAL INFORMATION:**

A. Please complete the following:

1. Name: \_\_\_\_\_
2. Title: \_\_\_\_\_
3. Juris No.: \_\_\_\_\_
4. Year Juris Doctor received: \_\_\_\_\_
5. Juris Doctor received from: \_\_\_\_\_
6. Office Address: \_\_\_\_\_
7. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
8. Office Telephone: \_\_\_\_\_
9. Home Address: \_\_\_\_\_
10. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
11. Home Telephone: \_\_\_\_\_
12. Married \_\_\_\_ Single \_\_\_\_ Divorced \_\_\_\_ Separated \_\_\_\_
13. If married, name of spouse: \_\_\_\_\_
14. # of Dependents Claimed on Your Federal Income Tax: \_\_\_\_\_

**II. EMPLOYMENT INFORMATION:**

A. Please complete the following:

1. Who are you currently employed full time by?  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

2. When did your full time employment commence?

\_\_\_\_\_

3. What is the % of your practice which is devoted to the defense or prosecution of persons in criminal or juvenile matters? \_\_\_\_\_ %

B. Please attach the 1<sup>st</sup> page of your **2010 Federal Income Tax Return**.

C. Please attach that portion of the **Employment Verification** form completed by the Employer.

### III. LAW SCHOOL ELIGIBLE STUDENT LOAN INFORMATION:

A. Attach copies of your most recent statements of all outstanding law school student loans listed in this Application. Include lender and account information including current outstanding balance due and payment status. Also provide the following information below. (Use additional sheets if necessary):

#### 1. Law School Loan # 1

Lender: \_\_\_\_\_

Lender Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Type: \_\_\_\_\_

Loan Account No.: \_\_\_\_\_

Loan Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Is the loan in default status? Yes \_\_\_\_ No \_\_\_\_

#### 2. Law School Loan # 2

Lender: \_\_\_\_\_

Lender Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Type: \_\_\_\_\_

Loan Account No.: \_\_\_\_\_

Loan Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Is the loan in default status? Yes \_\_\_\_ No \_\_\_\_

**3. Law School Loan # 3**

Lender: \_\_\_\_\_

Lender Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Type: \_\_\_\_\_

Loan Account No.: \_\_\_\_\_

Loan Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Is the loan in default status? Yes \_\_\_\_ No \_\_\_\_

**IV. OTHER OUTSTANDING STUDENT LOANS OF THE APPLICANT**

A. Please provide the following information pertaining to any other outstanding student loans that you have (Use additional sheets if necessary):

1. Lender: \_\_\_\_\_

Lender Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Type: \_\_\_\_\_

Loan Account No.: \_\_\_\_\_

Loan Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

2. Lender: \_\_\_\_\_

Lender Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Type: \_\_\_\_\_

Loan Account No.: \_\_\_\_\_

Loan Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

**V. OUTSTANDING STUDENT LOANS OF SPOUSE/PARTNER OF APPLICANT**

A. Please provide the following information pertaining to any outstanding student loans in the name of your spouse or partner (Use additional sheets if necessary):

1. Lender: \_\_\_\_\_

Lender Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Loan Type: \_\_\_\_\_

Loan Account No.: \_\_\_\_\_

Loan Balance: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

2. Lender: \_\_\_\_\_  
Lender Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Loan Type: \_\_\_\_\_  
Loan Account No.: \_\_\_\_\_  
Loan Balance: \$\_\_\_\_\_ Monthly Payment: \$\_\_\_\_\_

## VI. SERVICE AGREEMENT

A. Attach a completed and executed **Service Agreement** to this Application.

## VII. CERTIFICATION

All the information on this application is true and accurate to the best of my knowledge:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Print Name

Subscribed and sworn to on the \_\_\_\_\_ day of \_\_\_\_\_, 2011 at  
\_\_\_\_\_, CT by \_\_\_\_\_.

\_\_\_\_\_  
Commissioner of the Superior Court or  
Notary Public  
(Commission Expiration Date - \_\_\_\_\_)

**Connecticut - John R. Justice Loan Repayment Assistance  
Employment Verification**

**Section A – Release - To be completed by the Applicant.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

*I, \_\_\_\_\_ authorize my  
employer, \_\_\_\_\_ to  
provide the employment information requested by the Connecticut John R. Justice  
Loan Repayment Assistance Program.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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**Section B. Employment Information (to be completed by the Employer)**

**The above named employee has applied for benefits from the Connecticut John R. Justice Student Loan Repayment Program. Please complete the following section and return this form to the Applicant.**

Date of Hire: \_\_\_\_\_ Employee Job Title: \_\_\_\_\_

Applicant employed full time? Yes \_\_\_ No \_\_\_ Current Annual Salary: \_\_\_\_\_

Organization Name/Address: \_\_\_\_\_

\_\_\_\_\_  
Employee office address: \_\_\_\_\_

*I certify that the information provided above is true and complete to the best of my  
knowledge and that the applicant meets the Connecticut John R. Justice Student Loan  
Repayment Program eligibility definition of prosecutor or public defender.*

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Date

Printed Name/Title: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-mail: \_\_\_\_\_